TRANSMITTAL FORM

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First Named Inventor	Amar
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Examiner Name	N. Pass
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ENCLOSURES (check all that apply)								
	Transmittal Form Check Attached Copy of Fee Transmittal Form		Parts of Applic	e to File Missing cation (PTO-1553)		Request for Certificate of Correction Certificate of Correction		
			Formal Drawir	Orawing(s)		(in duplicate) Notice of Appeal to Board		
Amendment/Response Preliminary After Final Affidativis/declaration(s) Letter to Official Draftsperson including Drawings Total Sheets Petition for Extension of Time	Amendment/Response		Request For Co Examination (I Transmittal	CE)	of Patent Appeals and Interferences Appeal Brief (in triplicate)			
	After Final Affidavits/declaration(s)		Power of Attorney (Revocation of Prior Powers)			Status Inquiry		
		,	Revocation of Prior Powers)		Return Receipt Postcard			
			Terminal Disclaimer Executed Declaration and Power		Certificate of Facsimile Transmission under 37 C.F.R. 1.8			
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Usual Supplemental Information Disclosure Statement Form PTO-1449 Copies of IDS Citations (B2-B4, C1-C207)		Small Entity Statement						
	Copies of IDS Citations (B2-B4,	CD(s) for large table or computer program						
Certified Copy of Priority Document(s)			Amendment After Allowance					
	Sequence Listing submission Paper Copy/CD Computer Readable Copy	CERTIFICATE OF ELECTRONIC TRANSMISSION I hereby certify that this correspondence, and any document(s) referred to as enclosed herein,						
	Statement verifying identity of above	are being electronically filed on this 25th day of April 2007. Stucial ecale Patricia Cicalese				2007. triceas é calese		
CORRESPONDENCE ADDRESS			SIGNATURE BLOCK					
Direct all correspondence to: Patent Administrator Proskauer Rose LLP One International Place			Date: April 25, 200	07 4	Respectfully submitted			

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